## DETAILED ACTION

## EXAMINER'S AMENDMENT

1. An examiner's amendment to the record appears below. Should the changes and/or additions be unacceptable to applicant, an amendment may be filed as provided by 37 CFR 1.312. To ensure consideration of such an amendment, it MUST be submitted no later than the payment of the issue fee.

Authorization for this examiner's amendment was given in a telephone interview with Irah Donner on September 18, 2009.

The application has been amended as follows:

1. (Currently Amended) A computer implemented method for providing virtual mentoring to an insurance claim professional of an insurance organization, comprising:

electronically storing insurance based knowledge data relating to mentoring an insurance claim professional in a computer knowledge database determined by:

electronically storing data obtained from conducting discussions with designated leaders of multiple disciplines and advisory entities within the organization about knowledge relating to the mentoring;

electronically storing data determined from identifying various insurance based Quality Management (QM) results and outcomes considered by the organization based on the discussions; and

electronically storing data from converting the insurance based QM results and outcomes into the knowledge data for storing in the computer knowledge database;

electronically storing insurance based expert data determined from consulting experts on the identified insurance based QM results and outcomes within the organization to obtain each expert's individual experience and intellectual capital on the identified insurance based QM results and outcomes, and converting the expert's individual experience and intellectual capital into the expert data;

electronically storing additional insurance based knowledge data relating to the mentoring determined through an exchange or extraction of information on designated topics that are presented in designated communications with members of the organization, and converting the exchanged or extracted information into the additional knowledge data for storing in the knowledge database;

retrieving the stored insurance based knowledge data from the computer knowledge database, the stored insurance based expert data, and the stored additional insurance based knowledge data and compiling detailed functional insurance based best practices and techniques of top functional experts based on the obtained individual experiences and intellectual capital, on the identified insurance based QM results/outcomes, and on the additional insurance knowledge data;

data mining and retrieving, by a computer, insurance based claim data of a plurality of claims of the insurance organization relating to the insurance based knowledge data and the additional insurance based knowledge data;

performing, by the computer, predictive modeling of the insurance based claim data, to implement at least one of identifying claims with potential for opportunity to improve outcomes, identifying which customers of the insurance organization will have the potential for increased future medical costs, targeting specialized interventions to improve health care, reducing future health care costs, and providing efficient and effective referrals for specialty resource reviews, wherein the predictive modeling comprises at least one model that is updatable based on additions or modifications to the stored insurance based claim data;

determining, by the computer, ~~a position, an~~ experience ~~and level of expertise~~ of the insurance claim professional within the organization when present, wherein the experience is determined by at least one of a skill set, an area of expertise, a job code, a length of service, a position, a level of expertise, a level experience and an exposure to insurance claims; and

based on the experience of the insurance claim professional, providing, by the computer, the mentoring for the insurance claim professional by interactively guiding the insurance claim professional to process an identified claim responsive to at least one of the insurance based claim data, the insurance based knowledge data, the insurance based expert data, the additional insurance based knowledge data, predictive logic, the insurance based QM results and outcomes, and the insurance based functional best practices, to provide training information to the insurance claim professionals of the organization ~~based on the position and the level of expertise of the insurance claim professional within the organization~~.

2-12. (Cancelled)

13. (Currently Amended) A computer implemented method for providing virtual mentoring to an insurance claim professional of an insurance organization, comprising:

electronically retrieving, from at least one computer database, stored insurance based knowledge data comprising collective experience and intellectual capital data of the insurance organization and its personnel, and stored insurance based claim data of a plurality of insurance based claims of the insurance organization;

performing, by a computer, data mining of the insurance based claim data, wherein said data mining further comprises performing, by the computer, predictive modeling of the insurance based claim data, to implement at least one of identifying claims with potential for opportunity to improve outcomes, identifying which customers of the insurance organization will have the potential for increased future medical costs, targeting specialized interventions to improve health care, reducing future health care costs, and providing efficient and effective referrals for specialty resource reviews, wherein the predictive modeling comprises at least one model that is updatable based on additions or modifications to the stored insurance based claim data;

determining, by the computer, an experience of the insurance claim professional within the organization, wherein the experience is determined by at least one of a skill set, an area of expertise, a job code, a length of service, a position, a level of expertise, a level experience and an exposure to insurance claims; and

based on the experience of the insurance claim professional, executing, by the computer, an interactive virtual mentoring process with the insurance claim professional which guides the insurance claim professional in administering a particular one or more of the insurance based claims, using the insurance based claim data, the insurance based knowledge data, and the predictive modeling of the insurance based claim data.

14. (Previously Presented) The method of claim 13, wherein the insurance based knowledge data includes at least one of special account instructions, state rules and regulations, functional best practices, quality management results or outcomes, and techniques of top functional experts.

15. (Previously Presented) The method of claim 13, wherein at least one of the insurance based knowledge data and the insurance based claim data relates to the particular one or more insurance claims.

16. (Previously Presented) The method of claim 13, wherein the virtual mentoring is executed responsive to individual experience of the insurance claim professional.

17. (Cancelled)

18. (Previously Presented) The method of claim 13, wherein the virtual mentoring is executed with a specific frequency or at a specific time during management of the insurance based claims.

19. (Previously Presented) The method of claim 13, wherein the virtual mentoring is executed responsive to one or more particular circumstances of the insurance based claims.

20. (Previously Presented) The method of claim 13, further comprising at least one of:

updating the stored insurance based claim data based on at least one of added or modified insurance claim information and insurance claim handling information; and

updating the stored insurance based knowledge data.

21. (Previously Presented) The method of claim 20, wherein the stored insurance based knowledge data is updated based on at least one of new or modified state rules and regulations and special account instructions.

22. (Canceled)

23. (Previously Presented) The method of claim 13, wherein the predictive modeling identifies the insurance based claims for referral for at least one specialty resource review.

24. (Previously Presented) The method of claim 23, where in the specialty resource is loss prevention and engineering, special investigations unit, major case unit, subrogation case unit, or medical management.

25. (Previously Presented) The method of claim 16, wherein the experience of the insurance claim professional is in at least one of investigative claim unit, return to work, claim resolution unit, critical claim unit, and medical.

26. (Currently Amended) A computer implemented method for providing virtual mentoring to an insurance claim professional of an insurance organization, comprising:

retrieving, from at least one computer database, stored insurance based knowledge data comprising insurance based Quality Management (QM) results and outcomes data, stored expert data comprising expert experience and knowledge on the insurance based QM results and outcomes data, and stored additional insurance based knowledge data relating to mentoring information collected from members of the insurance organization;

compiling functional best practice data based on the stored expert data comprising expert experience and knowledge on the insurance based QM results and outcomes data and the stored additional insurance based knowledge data;

performing, by a computer, predictive modeling of claim data from a plurality of claims of the insurance organization relating to the insurance based knowledge data and the additional insurance based knowledge data to implement at least one of identifying claims with potential for opportunity to improve outcomes, identifying which customers

of the insurance organization will have the potential for increased future medical costs, targeting specialized interventions to improve health care, reducing future health care costs, and providing efficient and effective referrals for specialty resource reviews, wherein the predictive modeling comprises at least one model that is updatable based on additions or modifications to the stored insurance based claim data;

determining, by the computer, an experience of the insurance claim professional within the organization, wherein the experience is determined by at least one of a skill set, an area of expertise, a job code, a length of service, a position, a level of expertise, a level experience and an exposure to insurance claims; and

based on the experience of the insurance claim professional, providing, by the computer, the mentoring for the insurance claim professional by interactively guiding the insurance claim professional to review an identified claim responsive to the claim data collected from the plurality of claims, state rules and regulations, special account instructions, on-line help, the predictive modeling, the insurance based QM results and outcomes data, the functional best practices data, and the expert data to provide training information to the insurance claim professionals of the insurance organization ~~based on a position and level of expertise of the insurance claim professional within the insurance organization~~.

27. (Currently Amended) The method of claim 1, further comprising:

processing by the computer the insurance based claim data in conjunction with the insurance based QM results and outcomes; and

electronically transmitting training information based on the experience ~~position and level of expertise~~ of the insurance claim professional.

28. (Currently Amended) The method of claim 1, further comprising:

processing by the computer the insurance based claim data in conjunction with the insurance based QM results and outcomes;

determining a predetermined insurance claim professional based on the experience ~~position and level of expertise~~ of the insurance claim professional; and

automatically electronically transmitting to the predetermined insurance claim professional insurance claim processing information based on the experience ~~position and level of expertise~~ of the insurance claim professional.

29. (Previously Presented) The method of claim 1, further comprising:

processing by the computer the insurance based claim data in conjunction with the insurance based QM results and outcomes;

determining a predetermined insurance claim professional based on the insurance claim professional processing a substantially similar insurance claim; and

automatically electronically transmitting to the predetermined insurance claim professional insurance claim processing information based on the insurance claim professional processing the substantially similar insurance claim.

30. (Previously Presented) The method of claim 1, further comprising automatically transmitting to the insurance claim professional, responsive to the level of experience, predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim.

31. (Previously Presented) The method of claim 1, further comprising automatically transmitting the insurance claim professional predetermined insurance information and to direct the insurance claim professional to at least one type of action for processing the insurance claim and specific information including, when present, at least one of rules and regulations that the insurance claim professional must satisfy when processing the insurance claim, including automatically administering the insurance claim with respect to the at least one of the rules and the regulations.

32. (Previously Presented) The method of claim 1, wherein said performing, by the computer, the predictive modeling of the insurance based claim data further comprises identifying, by the computer, insurance claims responsive to predetermined description codes to automatically transmit to a predetermined insurance claim professional having experience with processing insurance claims associated with the predetermined description code, insurance claim processing information to assist the predetermined insurance claim professional in processing the insurance claim.

33. (Previously Presented) The method of claim 1, further comprising:

determining by the computer when the additional information is at least one of added and modified in connection with the insurance claim; and

automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of actions for processing the insurance claim responsive to the additional information.

34. (Previously Presented) The method of claim 13, further comprising automatically transmitting to the insurance claim professional, responsive to the level of experience, predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim.

35. (Previously Presented) The method of claim 13, further comprising automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim and customer specific information to allow the insurance claim professional to process customer-specific service requirements when processing the insurance claim.

36. (Previously Presented The method of claim 13, further comprising automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim and customer specific information to allow the insurance claim professional to process customer-specific service requirements including customer forms and claim status

updates that the insurance claim professional is required to provide the customer when processing the insurance claim.

37. (Previously Presented) The method of claim 13, further comprising automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim and specific information including, when present, at least one of rules and regulations that the insurance claim professional must satisfy when processing the insurance claim.

38. (Previously Presented) The method of claim 13, further comprising automatically transmitting the insurance claim professional predetermined insurance information and to direct the insurance claim professional to at least one type of action for processing the insurance claim and specific information including, when present, at least one of rules and regulations that the insurance claim professional must satisfy when processing the insurance claim, including automatically administering at least a portion of the insurance claim with respect to the at least one of the rules and the regulations.

39. (Previously Presented) The method of claim 13, further comprising automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim and specific information including, when present, at least one of rules and

regulations that the insurance claim professional must satisfy when processing a workers compensation claim, including automatically transmitting to the insurance claim professional information for administering governmental forms for predetermined time intervals to process the workers compensation claim.

40. (Previously Presented) The method of claim 13, wherein said performing, by the computer, the predictive modeling of the insurance based claim data further comprises identifying, by the computer, insurance claims responsive to predetermined criteria to automatically transmit to a predetermined insurance claim professional insurance claim processing information to assist the predetermined insurance claim professional in processing the insurance claim.

41. (Previously Presented) The method of claim 13, wherein said performing, by the computer, the predictive modeling of the insurance based claim data further comprises identifying, by the computer, insurance claims responsive to predetermined criteria to automatically transmit to a predetermined insurance claim professional insurance claim processing information to assist the predetermined insurance claim professional in processing the insurance claim including determining whether to provide at least one of a medical assignment, co-assignment and suspend assignment of the insurance claim.

42. (Previously Presented) The method of claim 13, wherein said performing, by the computer, the predictive modeling of the insurance based claim data further comprises

identifying, by the computer, insurance claims responsive to predetermined description codes to automatically transmit to a predetermined insurance claim professional having experience with processing insurance claims associated with the predetermined description code, insurance claim processing information to assist the predetermined insurance claim professional in processing the insurance claim.

43. (Previously Presented) The method of claim 13, further comprising:

determining by the computer when the additional information is at least one of added and modified in connection with the insurance claim; and

automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of actions for processing the insurance claim responsive to the additional information.

44. (Cancelled)

45. (New) The method of claim 26, further comprising:

processing by the computer the insurance based claim data in conjunction with the insurance based QM results and outcomes; and

electronically transmitting training information based on the experience of the insurance claim professional.

46. (New) The method of claim 26, further comprising:

processing by the computer the insurance based claim data in conjunction with the insurance based QM results and outcomes;

determining a predetermined insurance claim professional based on the experience of the insurance claim professional; and

automatically electronically transmitting to the predetermined insurance claim professional insurance claim processing information based on the experience of the insurance claim professional.

47. (New) The method of claim 26, further comprising:

processing by the computer the insurance based claim data in conjunction with the insurance based QM results and outcomes;

determining a predetermined insurance claim professional based on the insurance claim professional processing a substantially similar insurance claim; and

automatically electronically transmitting to the predetermined insurance claim professional insurance claim processing information based on the insurance claim professional processing the substantially similar insurance claim.

48. (New) The method of claim 26, further comprising automatically transmitting to the insurance claim professional, responsive to the level of experience, predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim.

49. (New) The method of claim 26, further comprising automatically transmitting the insurance claim professional predetermined insurance information and to direct the insurance claim professional to at least one type of action for processing the insurance claim and specific information including, when present, at least one of rules and regulations that the insurance claim professional must satisfy when processing the insurance claim, including automatically administering the insurance claim with respect to the at least one of the rules and the regulations.

50. (New) The method of claim 26, wherein said performing, by the computer, the predictive modeling of the insurance based claim data further comprises identifying, by the computer, insurance claims responsive to predetermined description codes to automatically transmit to a predetermined insurance claim professional having experience with processing insurance claims associated with the predetermined description code, insurance claim processing information to assist the predetermined insurance claim professional in processing the insurance claim.

51. (New) The method of claim 26, further comprising:

determining by the computer when the additional information is at least one of added and modified in connection with the insurance claim; and

automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of actions for processing the insurance claim responsive to the additional information.

52. (New) The method of claim 26, further comprising automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim and customer specific information to allow the insurance claim professional to process customer-specific service requirements when processing the insurance claim.

53. (New) The method of claim 26, further comprising automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim and customer specific information to allow the insurance claim professional to process customer-specific service requirements including customer forms and claim status updates that the insurance claim professional is required to provide the customer when processing the insurance claim.

54. (New) The method of claim 26, further comprising automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim and specific information including, when present, at least one of rules and regulations that the insurance claim professional must satisfy when processing the insurance claim.

55. (New) The method of claim 26, further comprising automatically transmitting to the insurance claim professional predetermined insurance information to direct the insurance claim professional to at least one type of action for processing the insurance claim and specific information including, when present, at least one of rules and regulations that the insurance claim professional must satisfy when processing a workers compensation claim, including automatically transmitting to the insurance claim professional information for administering governmental forms for predetermined time intervals to process the workers compensation claim.

56. (New) The method of claim 26, wherein said performing, by the computer, the predictive modeling of the insurance based claim data further comprises identifying, by the computer, insurance claims responsive to predetermined criteria to automatically transmit to a predetermined insurance claim professional insurance claim processing information to assist the predetermined insurance claim professional in processing the insurance claim.

57. (New) The method of claim 26, wherein said performing, by the computer, the predictive modeling of the insurance based claim data further comprises identifying, by the computer, insurance claims responsive to predetermined criteria to automatically transmit to a predetermined insurance claim professional insurance claim processing information to assist the predetermined insurance claim professional in processing the insurance claim including determining whether to provide at least one of a medical assignment, co-assignment and suspend assignment of the insurance claim.

2. The following is an examiner's statement of reasons for allowance:

Neither nor any of the prior art of record, taken individually or in any combination, fairly teach, inter alia, the combination of the steps of:

electronically storing insurance based knowledge data relating to mentoring an insurance claim professional in a computer knowledge database determined by:

electronically storing data obtained from conducting discussions with designated leaders of multiple disciplines and advisory entities within the organization about knowledge relating to the mentoring;

electronically storing data determined from identifying various insurance based Quality Management (QM) results and outcomes considered by the organization based on the discussions; and

electronically storing data from converting the insurance based QM results and outcomes into the knowledge data for storing in the computer knowledge database;

electronically storing insurance based expert data determined from consulting experts on the identified insurance based QM results and outcomes within the organization to obtain each expert's individual experience and intellectual capital on the identified insurance based QM results and outcomes, and converting the expert's individual experience and intellectual capital into the expert data;

electronically storing additional insurance based knowledge data relating to the mentoring determined through an exchange or extraction of information on designated topics that are presented in designated communications with members of the organization,

and converting the exchanged or extracted information into the additional knowledge data for storing in the knowledge database;

retrieving the stored insurance based knowledge data from the computer knowledge database, the stored insurance based expert data, and the stored additional insurance based knowledge data and compiling detailed functional insurance based best practices and techniques of top functional experts based on the obtained individual experiences and intellectual capital, on the identified insurance based QM results/outcomes, and on the additional insurance knowledge data;

data mining and retrieving, by a computer, insurance based claim data of a plurality of claims of the insurance organization relating to the insurance based knowledge data and the additional insurance based knowledge data;

performing, by the computer, predictive modeling of the insurance based claim data, to implement at least one of identifying claims with potential for opportunity to improve outcomes, identifying which customers of the insurance organization will have the potential for increased future medical costs, targeting specialized interventions to improve health care, reducing future health care costs, and providing efficient and effective referrals for specialty resource reviews, wherein the predictive modeling comprises at least one model that is updatable based on additions or modifications to the stored insurance based claim data;

determining, by the computer, an experience of the insurance claim professional within the organization when present, wherein the experience is determined by at least

one of a skill set, an area of expertise, a job code, a length of service, a position, a level of expertise, a level experience and an exposure to insurance claims; and

based on the experience of the insurance claim professional, providing, by the computer, the mentoring for the insurance claim professional by interactively guiding the insurance claim professional to process an identified claim responsive to at least one of the insurance based claim data, the insurance based knowledge data, the insurance based expert data, the additional insurance based knowledge data, predictive logic, the insurance based QM results and outcomes, and the insurance based functional best practices, to provide training information to the insurance claim professionals of the organization.

The closest prior art on record, FHRDC, teaches storing knowledge data in a knowledge database obtained from conducting discussions with designated leaders and advisory entities, various Quality Management results and outcomes, converting the Quality Management results and outcomes into knowledge data, storing expert data by consulting experts on the identified Quality Management results and outcomes to obtain each expert's individual experience and intellectual capital on the Quality Management results and outcomes, converting the individual experience and intellectual capital into the expert data, storing additional knowledge data determined through an exchange or extraction of information on designated topics, compiling detailed functional best practices and techniques of top functional experts, data mining and performing predictive modeling, and providing interactive mentoring. However, FHRDC is not directed towards insurance, and the information, designated topics, best practices,

individual experience, intellectual capital, top techniques, Quality Management results and outcomes are not insurance based. The predictive modeling of FHRDC is not performed to identify potential for opportunity to improve outcomes, identify customers with potential for increased future medical costs, targeting specialized interventions to improve health care, reduce future health care costs, or provide efficient and effective referrals for specialty resource reviews. The predictive modeling of FHRDC further does not comprise at least one model that is updatable based on additions or modifications to the stored insurance based claim data. The mentoring provided by FHRDC is not based on user experience, which is determined by at least one of a skill set, an area of expertise, a job code, a length of service, a position, a level of expertise, a level experience, and an exposure to insurance claims. Further, the mentoring provided by FHRDC is not directed towards processing an identified insurance claim, administering a particular insurance based claim, or reviewing an identified claim.

Similarly, Johnson et al. teaches predictive modeling and delivering customized training to sales agents. However, Johnson et al. is directed towards the sale of products and is not insurance based. Further, the training provided by Johnson et al. is based on pre-built computer-based training courses and provides a customized sequence of progression based on the user's completion of training activities, skills and abilities. The predictive modeling provided by Johnson et al. does not comprise at least one model that is updatable based on additions or modifications to stored insurance data. Further, the predictive modeling performed by Johnson et al. is directed towards

sales, revenue, commission and profit, and not for the claimed purpose of at least one of identifying claims with potential for opportunity to improve outcomes, identifying which customers of the insurance organization will have the potential for increased future medical costs, targeting specialized interventions to improve health care, reducing future health care costs, and providing efficient and effective referrals for specialty resource reviews. Further, the mentoring provided by Johnson et al. is directed towards obtaining pre-determined levels of competency with product lines or data, and processing an identified insurance claim, administering a particular insurance based claim, or reviewing an identified claim, as is required in the instant application.

Any comments considered necessary by applicant must be submitted no later than the payment of the issue fee and, to avoid processing delays, should preferably accompany the issue fee. Such submissions should be clearly labeled “Comments on Statement of Reasons for Allowance.”

***Conclusion***

3. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

Armentano and Beckett's "Empowering Employees to Manage Their Own Return to Work", published in the November 2001 issue of Risk Management, describes matching professional claims skills to claim complexity, creating specialty functions, and utilizing predictive modeling to identify claims issues in the workers' compensation process, while also describing a series of focus groups conduced by Travelers Insurance to determine the workers' perceptions of the workers' compensation claims process.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to PETER CHOI whose telephone number is (571)272-6971. The examiner can normally be reached on M-F 9-5.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Beth Boswell can be reached on (571) 272-6737. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/P. C./
Examiner, Art Unit 3623

/Jonathan G. Sterrett/

Primary Examiner, Art Unit 3623